



ARTIST'S INVOICE– FEES



SAMPLE SHEET

Date Submitted	(Day / Month / Year) 05 / 01 / 2009 /		
Name	Anna Arts		
Mailing Address	1600 4 th Ave		
City/ Province	Regina, SK	Postal Code	S4R 8C8
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Please fill in the appropriate dates under the following headings.

School/Teacher/Grade	Teacher Planning Session (\$40)	1 st Artist Visit (\$70)	2 nd Artist Visit (\$70)	3 rd Artist Visit (\$70)	Fee \$250/class
Massy Miss. Teacher 3	Feb. 4 th	Feb. 11	Feb. 18	Feb. 25	\$250
Argyle Mr. Educator 5/6	Feb. 5 th	Feb. 9	Feb. 16	Feb. 26	\$250
					\$
					\$
					\$
					\$
					\$
					\$
					\$
				Total	\$500.00

Facilitator: _____

Superintendent: _____